

2015 NOV -3 PM 2: 14

ommittee Name:
MERICANS FOR LIBERTY AND FREE ENTERPRISE
registered, FEC ID:
oday's Date:
06/02/2015
ederal Election Commission 99 E Street, N.W. Vashington, D.C. 20463
e: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:	_
GARY F FOX II	, Treasurer

## 2045 - 44 - 03 - 03 - 00034529

**FEC** 

Use

Only

## STATEMENT OF **ORGANIZATION**

2015 NOV -3 AM 11:32 FORM 1 NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. ADDRESS (number and street) (Check if address 'ASHINGT is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) @2AMENDMENT.ORG (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. **GARY F FOX II** Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

**FEC FORM 1** (Revised 02/2009)

2015
03
03

FEC I	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	
Candida	nte Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.	.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidate		<u>                                     </u>
Candidate Party Affili	ation Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Pa
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization
_	Corporation W/o Capital Stock	Labor Organization
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) E	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or pa
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo or more political
	committees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Co	ommittees Participating in Joint Fundraiser	
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2.	FEC ID number C	
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	AMERICANS FOR LIBERTY AND FREE ENTERPRISE						
6.		rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
N	NOTAPPLICABLE						
L							
	Mailing Address						
	·	CITY STATE ZIP CODE					
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					
7.	7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
	Full Name BRYAI	N CROSSWHITE					
	Mailing Address	300 MASSACHUSETTS AVE NW					
		WASHINGTON DC 20001					
	Title or Position	CITY STATE ZIP CODE					
	CUSTODIAN OF	RECORDS  Telephone number					
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
	Full Name GARY F FOX II of Treasurer						
Mailing Address 300 MASSACHUSETTS AVE NW							
		WASHINGTON DC 20001 - IDC ZIP CODE					
	Title or Position TREASURER	Telephone number					

CITY

STATE

ZIP CODE

Retail

**IERICANS for LIBERTY and FREE ENTERPRISE** 

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1shington, DC 20001

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FEDERAL ELECTION COMMISSION

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WASHINGTON, DC 20463

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